Name : Mr. Sl	HAMBHU PRASAD (47 /M)		Date : 21/03/2024
Address :			
Examined by:			UHID : AMHL.0002054192
Package : MEDIWH	HEEL - FULL BODY ANNUAL I	PLUS WITH TMT MALE HO	CK AHC No : AMHLAH200871
		Knee (bilateral) - pain	
	AINTS	Skin	
For corporate health che Sleep apnoea	ckup	- Nil Significant	
PRESENT KNOWN I	LINESS	Version Past medical his	tory
No history of	- Hypertension,	Past medical history	- nil significant
	Dyslipidemia, Thyroid disorder, Heart disease,	Personal history	,
Diabataa mallitua	Stroke, Asthma - type 2; Medication -	Marital status	- Married
Diabetes mellitus	regular; - Jalra M 50/500	No. of children	-2
		Diet	- Non Vegetarian
	GY	Alcohol	- does not consume alcohol
NO KNOWN ALLERGY	:03/12/2022	Smoking	- No
		Chews tobacco	- No
SYSTEMIC RE	VIEW	Physical activity	- Mild
<b>N</b>		Family history	
Cardiovascular system		Father	- has expired
- Nil Significant		Mother	- has expired
Respiratory system		Diabetes	- father,mother
- Nil Significant		Coronary artery	- none
Oral and dental		disease	
- Nil Significant		Cancer	- None
C C		PHYSICAL EXAMIN	ATION
Gastrointestinal system	1		
- Nil Significant		General	
Genitourinary system		Build	- over weight
- Nil Significant		Height	- 160
Central nervous system		Weight	- 72
-		BMI	- 28.13
- Nil Significant		Pallor Oedema	- No
Eyes		Oedema	- no
Vision - normal		Cardiovascular s	system
ENT		Heart rate (Per minute)	- 82
- Sleep apnoea		Rhythm	- Regular
Musculoskeletal system	n		- B.P. Standing
-	1	Systolic(mm of Hg)	- 142
Spine and joints		Diastolic(mm of Hg)	- 98

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Heart sounds

- S1S2+

## **Respiratory system**

Breath sounds

 Normal vesicular breath sounds



Appearance- NormalOrganomegaly- NoTenderness- NoBowel sounds- Normal

#### **Opthalmology consultation**

Opthalmology findings

- UCVA:RE:6/9 LE:6/9 NVA:RE:N8 LE:N8 OCULAR MOVEMENT:WNL ANT.SEG:(BE)EARLY CHANGES ACCPT:SPECTACLE PWR RE:-0.50DS(6/6P) LE:-0.50X85\*(6/6) ADD(BE):+2.00DSPH(N6) ADVICE:\*Glass Rx.\*Detail dilated Funduscopy\*Review after 1yr/SOS

Printed By : Benazir Begaum

Date : 21/03/2024

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COMPLETE HAEMO	Result		Level	Range	Casts:	Not Fou	ind	
Hemoglobin	13.0	g/dl		Kange 13.0-17.0	Crystals:	Not Found Urine protein rechecked an confirmed by sulphosalicyli		
RBC COUNT	4.25 *	g/ui Million/ ul		4.5-5.5	NOTE : -			
Hematocrit - Hct:	39.4 *	%	•	41-53		test		
MCV	92.8	fl	•	83-101	URINE SUGAR - POS	T PRAN	DIAL	
MCH	30.5	pg	•	27-32	(QUALITATIVE) Test Name	Result	linit is	vel Rano
MCHC	32.9	%	•	31.5-34.5	URINE	+++	OUIT Le	lei Kali
RDW	14.5 *	%	•	11.8-14.0	GLUCOSE(POST			
WBC Count	4400	/cu mn	า ●	4000-10000	PRANDIAL)			
Platelet Count	1.62	lacs/cu mm		1.5-4.0	URINE SUGAR- FAST Test Name	ING(QU Result		E) vel Rang
Neutrophils	55	%	•	40-80	URINE	Nil		
Lymphocytes	36	%	•	20-40	GLUCOSE(FASTING)			
Monocytes	06	%	•	2-10	BLOOD GROUPING A		VING (ABC	) AND F
Eosinophils	03	%	•	01-06	Test Name	Result	•	vel Ran <u>ç</u>
Basophils	00	%	•	0-0	ABO Group:	В		
RBC:	Normoc	Normocytic Normochromic cells			Rh (D) Type:	POSITI	VE	
Platelets:	Adequa	te.			LIVER FUNCTION TE	ST (PAC	KAGE)	
ERYTHROCYTE SEDIMENTATION	35 *	mm/1s hr	t 🛡	0-15	<b>Test Name</b> ALT(SGPT) - SERUM	Result 67 *	Unit Lev U/L	vel Rang 0-50
RATE (ESR)					ALBUMIN - SERUM	4.7	g/dL	3.5-5
IRINE ROUTINE AN	D MICRO	SCOPY	(				-	
Test Name	Result	Unit	Level	Range	ALKALINE	135 *	U/L	43-1
Volume:	30	mL			PHOSPHATASE - SERUM			
Colour:	Pale Str	aw						
Appearance	Slightly	Turbid			AST (SGOT) - SERUM	51 *	U/L	0-50
Specific Gravity	1.010							
pH:	6.0				BILIRUBIN TOTAL - SERUM	1.0	mg/dL	0.3-1
Albumin:	Trace							
Glucose	Not Det	ected			LIPID PROFILE TEST	(PACKA Result	,	al Dam
Ketone:	Not Det	ected			Test Name CHOLESTEROL -	254 *	mg/dL	vel Rang 0-20
Bile Pigments	Not Det	ected			SERUM	204	ilig/dL	0-200
RBC	4-6	/hpf						
Pus Cells	1-2	/hpf			CREATININE - SERUN Test Name		Unit Le	vol Ranı
Epithelial Cells	Occasio	nalhpf			CREATININE - SERUM	0.7 *	mg/dL	

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LIVER FUNCTION TES	T (PAC	KAGE	E)		THYROID PROFILE -	I(T3,T4 /	AND TS	5H)	
Test Name	Result	Unit	Level	Range	Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	112 *	U/L	•	0-55	TOTAL T3: TRI IODOTHYRONINE - SERUM	1.36	ng/ml	•	0.87-1.78
GLUCOSE - PLASMA (	(FASTIN	IG)			TOTAL T4: THYROXINE - SERUM	12.27	µg/dL	•	5.48-14.2
Test Name	Result	Unit	Level	Range					
GLUCOSE - PLASMA	177 *	mg/d	L	70-99	LIPID PROFILE TEST	(PACK	AGE)		
(FASTING)					Test Name	Result	Unit	Level	Range
GLUCOSE - PLASMA (		PRAN	DIAL)		TRIGLYCERIDES -	90	mg/dL	•	0-150
Test Name	Result			Range	SERUM				
GLUCOSE - PLASMA	351 * mg/dL		70-140	THYROID PROFILE -	I(T3,T4 /	AND TS	6H)		
(POST PRANDIAL)		-			Test Name	Result	Unit	Level	Range
HBA1C (GLYCOSYLATED			TSH: THYROID STIMULATING	3.11	µIU/mI	•	0.38-5.3		
AEMOGLOBIN)-WHC		DOD			HORMONE - SERUM				
Test Name	Result	Unit	Level	Range					
HBA1C	8.7 *	%	•	Nondiadetic : 4					
(GLYCOSYLATED HAEMOGLOBIN)-WHO				- 5.6 % Prediabetics :	Test Name	Result		_	Range
LE BLOOD				5.7 - 6.4%	URIC ACID - SERUM	3.7	mg/dL	•	2.6-7.2
				Diabetes : >/= 6.5%					
				ADA	Test Name	Result	Unit	Level	Range
				Theraputic goal : <7%	BILIRUBIN CONJUGATED	0.2	mg/dL	•	0.0-0.2
IPID PROFILE TEST (		GE)			(DIRECT) - SERUM				
Test Name	Result	Unit	Level	Range	PROSTATIC SPECIFIC	C ANTIG	EN (PS	ΑΤΟ	TAL) -
HDL CHOLESTEROL -	56	mg/d	L	30-70	SERUM				_
SERUM					Test Name	Result		_	Range
LDL CHOLESTEROL -SERUM	182 *	mg/d	L	Optimal: <100	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) - SERUM	0.75	ng/mL	•	0.00-6.5
VLDL CHOLESTEROL -	16	mg/d	L	0-35	BUN (BLOOD UREA NITROGEN)				
SERUM (Calculated)					Test Name	Result		l evel	Range
LIVER FUNCTION TES		KAGE	=)		BUN (BLOOD UREA	7.0	mg/dL	_	7.0-18.0
Test Name	Result			Range	NITROGEN)		0		
PROTEIN TOTAL -	8.1	g/dL	•	6.4-8.3	LIVER FUNCTION TE	ST (PAC	KAGE)		
SERUM					Test Name	•	Unit		Range
GLOBULIN: (CALCULATED) -	3.4	g/dL	•	1.8-3.6	A/G - RATIO	1.4		•	1.0-2.0

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## **BUN/CREATININE RATIO**

Test Name	Result	Unit	Level	Range
BUN/CREATININE	10			
RATIO				

#### ECG

NORMAL SINUS RHYTHM, WITHIN NORMAL LIMITS.

#### **TREADMILL TEST / STRESS TEST**

STRESS TEST IS NEGATIVE FOR PROVOCABLE MYOCARDIAL ISCHAEMIA.

### ULTRASOUND SCREENING WHOLE ABDOMEN

\* Grade I fatty liver.

\* Cholelithiasis.

[NOTE: At times pelvic structures are not well visualized due to inadequate patient preparation / excess bowel gas shadow. However suggested clinical correlation and other investigations if clinically indicated.

### **X-RAY CHEST PA**

\* Chest skiagram does not reveal any significant abnormality.





**Borderline High/Low** 

**Out of Range** 

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Printed By :

AHC Physician / Consultant Internal Medicine

Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases. Name : Mr. SHAMBHU PRASAD (47 /M)

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AICVD	RISK	SCORE	REPORT
		OUCINE	

RISK STATUS	YOUR
Moderate Risk	

7

6

# Your likelihood of developing cardiovascular disease in the next ten years is 1.3 times higher than the people of your age and gender

The AICVD risk score developed by Apollo Hospitals is a novel artificial intelligence -based risk scoring system that predicts your risk of having Coronary Artery Disease (CAD) related events in the next ten years. This scoring system uses Indian data and has been validated by multiple national and international institutions. This risk score is more than 92% accurate and has been compiled based on your physical parameters, heart health attributes, lifestyle and medical history. **Note:** The risk category is determined through the ratio between guest score and acceptable score at multiple decimal points. The outputs are shown in whole numbers.

#### Based on your AICVD risk score you are advised the following:

- Follow the guidance and education on lifestyle and dietary management provided through the ProHealth program. Maintain a healthy BMI (<25). Avoid tobacco in any form and if you are a smoker, stop smoking.
- Continue with medications for high blood pressure, diabetes, or dyslipidemia, if advised by your physician.Maintain HbA1c <7% (<53mmol/mol), blood pressure <140/90mmHg.</li>
- Follow your physician's advice regarding follow up tests, consults and annual health assessment
- It is recommended that you visit your physician every 6 months if you have:
  - o Uncontrolled high blood pressure, Diabetes, Dyslipidemia, Coronary heart disease

#### DISCLAIMER

- 1. This is not a diagnostic tool and it does not guarantee accuracy of the result and cannot be acted upon independently.
- 2. This risk score and clinical algorithm is a general guideline for physicians. Any additional laboratory investigations, diagnostic imaging,
- treatment or patient education related to lifestyle management is under the physician 's or cardiologist's discretion.
- 3. To ensure the information in the report is up to date, accurate and correct, doctor shall be consulted for interpretation of the report.
- 4. Apollo Hospitals and its staff does not offer any assurance on the information made available or be liable for any loss or damage as the said report is based on the AICVD risk score without any intervention from their side .
- 5. By usage of the AICVD risk score, it is deemed that the beneficiary of this service has agreed to get the same done at his own risk and further agrees with this disclaimer without any limitation or any clauses or sub-clauses.

## The Clinical AI Models and APIs used at Apollo Hospitals are certified by ISO 13485 : 2016 vide certificate no. MD 763515